

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		<i>10/19/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		<i>71090</i>	<i>11/21/00</i>
RESPONSE FORMALITY REVIEW			

Best Available Copy

INDEX OF CLAIMS

✓ Rejected	N Non-elected
= Allowed	I Interference
- (Through numeral) ... Canceled	A Appeal
÷ Restricted	O Objected

Claim	Date
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If more than 150 claims or 10 actions
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